PATENT APPLICATION SERIAL NO.

U.S. DEPARTMENT OF COMMERCE PATENT AND TRADEMARK OFFICE FEE RECORD SHEET

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PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

								100100 39-1					
		CLAIMS AS	(Column 1)		(Column 2)			SMALL ENTITY TYPE		OR	OTHER THAN SMALL ENTITY		
TOTAL CLAIMS			7					RATE	FEE] [RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	370.00	OR	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS			ე minus 20=		•			X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			3 mi	nus 3 =	* -			X42=		OR	X84=		
ΜĹ	ILTIPLE DEPEN	IDENT CLAIM PI	RESENT					+140=		OR	+280=		
* If the difference in column 1 is less than ze					r "0" in c	column 2		TOTAL		OR	TOTAL	740.	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALL	ENTITY	OR	OTHER SMALL		
ENTA		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IEST BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	*	Minus	**		=		X\$ 9=	٠	OR	-X\$18=		
	Independent	*	Minus	***		<u> </u> -		X42=		OR	X84=		
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=	,	OR	+280=		
	(Column 1) (Column 2) (Column 3)						L	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	. X\$18=		
	Independent	*	Minus	***	COL 4114	=		X42=		OR	X84=		
L	FIRST PRESE	NTATION OF MU	JLI IPLE DEF	ENDEN	CLAIM			+140=		OR	+280=		
		•					Δ	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE		
	(Column 1) (Column 2) (Column 3)												
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***	F.CL AUA	<u> -</u>		X42=		OR	X84=		
L .	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR.	+280=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3 enter "3". ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3 enter "3".										I	TOTAL ADDIT. FEE		

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.